

Foster Family Home - Corrective Action Report

Provider ID: 1-180077

Home Name: Cherry Ancheta, CNA

Review ID: 1-180077-1

91-1052 Anaunau Street

Reviewer: Lori O'Keefe

Ewa Beach

HI 96706

Begin Date: 12/3/2018

End Date:

12/12/18

Foster Family Home

Required Certificate

[17-1454-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.d.1 - New home inspection completed. A corrective action report was issued and a corrective action plan is due back to CTA by 1/3/19.

Foster Family Home

Information Confidentiality

[17-1454-13.1]

13.1.(a) All information relating to individuals who apply for or receive home and community-based case management and community care foster family home services shall be confidential.

Comment:

13.1.a - Cg#2, CG#3, and HHM #1 have not received confidentiality training.

Lori O'Keefe
Compliance Manager

Cherry Ancheta
Primary Care Giver

12/3/18
Date

12/3/18
Date

Community Care Foster Family Home (CCFFH)
Written Plan of Correction for Deficiencies
Listed in Corrective Action Report
Chapter 17-1454

CCFFH Name: CHERRY ANCHETA
CCFFH Address: 91-1052 ANAUNAU ST, EWA BEACH, HI 96706

Rule Number	Corrective Action Taken	Date Corrected	Prevention Strategy
13.1.(c)	CG #2, CG #3 AND HHM #1 WAS RECEIVED READ AND TRAINED ON CONFIDENTIALITY TRAINING AND SIGNED THE FORM IN THE ADMINISTRATIVE BINDER.	12/05/18	TO GATHER MORE INFO AND MAKE SURE ALL CAREGIVERS AND HOUSEHOLD MEMBERS ARE ALL INFORMED FOR CONFIDENTIALITY TRAINING AND PRIVACY AT THE SAME TIME.

Primary Caregiver's Signature: 

Print Name: CHERRY ANCHETA

Date of Signature: 12/05/18